

PERMITTEE NAME/ADDRESS:
NAME: ANCHORAGE, MUNICIPALITY OF
ADDRESS: 3000 ARCTIC BLVD.
ANCHORAGE AK 99503-3898

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

AK0022551	001 A
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR
(SUBR 02)
F - FINAL

Form Approved
OMB No. 2040-0004

FACILITY: JOHN M. ASPLUND WWTF---301 (H)
LOCATION: ANCHORAGE, AK 99502
ATTN: MARK PREMO P.E. GEN MGR. AWWU

MONITORING PERIOD	
FROM 07 05 01	TO 07 05 31

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNIT			
TEMPERATURE, WATER DEG. CENTIGRADE 00010 G 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	11.2	(04)	N/A	FOUR/WEEK	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT MAXIMUM	DEG.C		FOUR/WEEK	GRAB
TEMPERATURE, WATER DEG. CENTIGRADE 00010 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	11.2	(04)	N/A	FOUR/WEEK	GRAB
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	REPORT MAXIMUM	DEG.C		FOUR/WEEK	GRAB
OXYGEN, DISSOLVED (DO) 00300 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	****	1.0	*****	*****	(19)	N/A	FIVE/WEEK	GRAB
	PERMIT REQUIREMENT	*****	*****	****	REPORT MO MIN	*****	*****	MG/L		FOUR/WEEK	GRAB
BOD, 5-DAY (20 DEG. C) 00310 G 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	53040	*****	(26)	*****	227	*****	(19)	N/A	FOUR/WEEK	COMP24
	PERMIT REQUIREMENT	REPORT MO AVG	*****	LBS/DY	*****	REPORT MO AVG	*****	MG/L		FOUR/WEEK	COMP24
BOD, 5-DAY (20 DEG. C) 00310 W 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	39207	(26)	*****	*****	167	(19)	0	FOUR/WEEK	COMP24
	PERMIT REQUIREMENT	*****	90100 DAILY MX	LBS/DY	*****	*****	300 DAILY MX	MG/L		FOUR/WEEK	COMP24
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	35476	37269	(26)	*****	150	160	(19)	0	FOUR/WEEK	COMP24
	PERMIT REQUIREMENT	72100 MO AVG	75100 WKLY AVG	LBS/DY	*****	240 MO AVG	250 WKLY AVG	MG/L		FOUR/WEEK	COMP24
PH 00400 G 0 0 RAW SEW/INFLUENT	SAMPLE MEASUREMENT	*****	*****	****	6.7	*****	7.8	(12)	N/A	FOUR/WEEK	GRAB
	PERMIT REQUIREMENT	*****	*****	****	REPORT MINIMUM	*****	REPORT MAXIMUM	SU		FOUR/WEEK	GRAB

NAME / TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 33 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)
Craig Woolard, P.E., Ph.D. Director, Treatment Division	
TYPED OR PRINTED	

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
(907)564-2799
AREA CODE NUMBER

TELEPHONE	DATE
(907)564-2799	07/06/07
AREA CODE NUMBER	YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
The final effluent autosampler is normally taken off line on Saturdays, Mondays, and Wednesdays for line cleaning for approximately 1.5 hours each time; the composite samples for BODs, TSS, etc. are therefore slightly less than a 24HC on these days.

ICIS 06/18/07

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MONITORING PERIOD

FROM 07 | 05 | 01 TO 07 | 05 | 31

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PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNIT			
PH	SAMPLE MEASUREMENT	*****	*****	***	6.6	*****	7.5	(12)	0	FOUR/WEEK	GRAB
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	***	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		FOUR/WEEK	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	55384	*****	(26)	*****	237	*****	(19)	N/A	FOUR/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED	PERMIT REQUIREMENT	REPORT MO AVG	*****	LBS/DAY	*****	REPORT MO AVG	*****	MG/L		FOUR/WEEK	COMP24
00530 G 0 0	SAMPLE MEASUREMENT	*****	17435	(26)	*****	*****	74	(19)	0	FOUR/WEEK	COMP24
RAW SEW/INFLUENT	PERMIT REQUIREMENT	*****	57000 DAILY MX	LBS/DAY	*****	*****	190 DAILY MX	MG/L		FOUR/WEEK	COMP24
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	14651	15838	(26)	*****	62	68	(19)	0	FOUR/WEEK	COMP24
00530 W 0 0	PERMIT REQUIREMENT	51000 MO AVG	54000 WKLY AVG	LBS/DAY	*****	170 MO AVG	180 WKLY AVG	MG/L		FOUR/WEEK	COMP24
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	***	*****	19.3	*****	(19)	N/A	ONCE/MONTH	COMP24
SOLIDS, TOTAL SUSPENDED	PERMIT REQUIREMENT	*****	*****	***	*****	REPORT MO AVG	*****	MG/L	N/A	ONCE/MONTH	COMP24
00530 1 0 0	SAMPLE MEASUREMENT	*****	*****	***	*****	47	*****	(30)	1	THREE/WEEK	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	850 MO GEO	*****	MPN/100ML		THREE/WEEK	GRAB
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	27.997	*****	(03)	*****	*****	*****	***	N/A	CONTINUOUS	RCORDR
00610 1 0 0	PERMIT REQUIREMENT	MO AVG	*****	MGD	*****	*****	*****	***		CONTINUOUS	RCORDR
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	***	*****	*****	*****	***		CONTINUOUS	RCORDR
FECAL COLIFORM, MPN, EC MED, 44.5C	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	***		CONTINUOUS	RCORDR
31615 1 0 0	SAMPLE MEASUREMENT	*****	*****	***	*****	*****	*****	***		CONTINUOUS	RCORDR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	***		CONTINUOUS	RCORDR
FLOW IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	*****	*****	***	*****	*****	*****	***		CONTINUOUS	RCORDR
50050 1 0 0	PERMIT REQUIREMENT	*****	*****	***	*****	*****	*****	***		CONTINUOUS	RCORDR
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****	***	*****	*****	*****	***		CONTINUOUS	RCORDR
PERMIT REQUIREMENT	*****	*****	*****	***	*****	*****	*****	***		CONTINUOUS	RCORDR

Craig Woolard, P.E., Ph.D.
Director, Treatment Division
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SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

TELEPHONE DATE
(907)564-2799 07/06/07
AREA CODE NUMBER YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
1) The permit has a fecal coliform limit that reads "Not more than 10% of the samples shall exceed 2600 FC MPN/ 100 mL." Two samples during May 2007 exceeded 2600 FC MPN/100 mL, which exceeds the 10% limit. Letter of explanation attached.

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LOCATION: ANCHORAGE, AK 99502
ATTN: MARK PREMO P.E. GEN MGR. AWWU

MONITORING PERIOD

FROM	07	05	01	TO	07	05	31
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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNIT			
CHLORINE, TOTAL RESIDUAL 50060 1 0 0	SAMPLE MEASUREMENT	*****	*****	****	*****	*****	1.0	(19)	0	EVERY 3 HRS	GRAB
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	1.2 DAILY MX	MG/L		EVERY 4 HRS	GRAB
BOD, 5-DAY PERCENT REMOVAL 81010 K 0 0	SAMPLE MEASUREMENT	*****	*****	****	34	*****	*****	(23)	N/A	ONCE/MONTH	CALCTD
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	*****	PER-CENT	N/A	ONCE/MONTH	CALCTD
SOLIDS, SUSPENDED PERCENT REMOVAL 81011 K 0 0	SAMPLE MEASUREMENT	*****	*****	****	74	*****	*****	(23)	N/A	ONCE/MONTH	CALCTD
PERCENT REMOVAL	PERMIT REQUIREMENT	*****	*****	****	REPORT MO AVG	*****	*****	PER-CENT	N/A	ONCE/MONTH	CALCTD

RECEIVED

JUN 11 2007

U.S. EPA REGION 10

OFFICE OF REGIONAL COUNCILS

A black and white photograph of a document with a large, tilted 'RECEIVED' stamp. The stamp includes the date 'JUN 11 2007' and the text 'U.S. EPA REGION 1' and 'OFFICE OF CONSUMER COMPLAINTS'. Below the stamp, the word 'TELEPHONE' is visible.

TELEPHONE	DATE
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SIGNATURE OF PRINCIPAL EXECUTIVE
OFFICER OR AUTHORIZED AGENT

1907\564-2799

07/06/07

AREA CODE NUMBER

YEAR MO DAY

NAME / TITLE PRINCIPAL EXECUTIVE OFFICER

Craig Woolard, P.E., Ph.D.
Director, Treatment Division

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I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. §1001 AND 38 U.S.C. §1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

2) Whole Effluent Toxicity Report for 2nd Quarter 2007 attached.



Municipality of Anchorage

3000 Arctic Blvd • Anchorage, Alaska 99503-3898 • Telephone (907) 786-5671 • Fax (907) 786-568
http://www.muni.org • http://www.awwu.biz

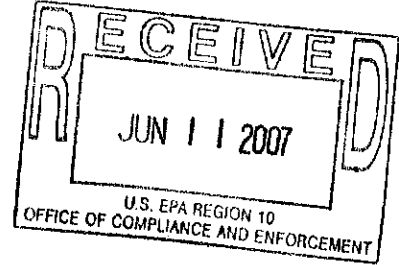


Mayor Mark Begich

Anchorage Water & Wastewater Utility Treatment Division

June 5, 2007

U.S. Environmental Protection Agency, Region 10
NPDES Compliance Unit
1200 Sixth Avenue, OW-133
Seattle, Washington 98101



Subject: Fecal Coliform Exceedance
NPDES Permit No. AK-002255-1

The John M. Asplund Water Pollution Control Facility has a fecal coliform limit that reads *"Not more than 10% of the samples shall exceed 2600 FC MPN/ 100 mL."* Two samples during May 2007 exceeded 2600 FC MPN/100 mL, which exceeds the 10% limit. The monthly average permit limit of 850 FC MPN/ 100 mL was not exceeded.

May 1, 2007: ≥ 24000 FC MPN/100 mL
May 9, 2007: ≥ 24000 FC MPN/100 mL

The chlorine demand of the wastewater began decreasing during the last two weeks in April due to an increase in daily treated flows from precipitation. Towards the end of April the precipitation and daily treated totals decreased and the chlorine demand began to increase during the first week of May. In response to these changes and resultant lower chlorine residuals we began to increase the millivolt setpoint on the ORP controller. As the chlorine demand changes as a result of precipitation influence, it is sometimes difficult to balance the control in a way to attain adequate coliform kill and not exceed the chlorine residual limit.

Our goal remains to review chlorine usage and residuals daily in order to adjust the ORP set point appropriately before getting high coliform counts, rather than in response to them. Our intention is to set the chlorine feed high enough to get adequate fecal coliform kill while minimizing chlorine usage.

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

I can be contacted at (907) 564-2799 should you have any questions.

Sincerely,

Craig Wooldard, P.E., Ph.D.
Director, Treatment Division

Cc: Alaska Department of Environmental Conservation, Division of Water
John F. Knue Jr. (Jack), General Foreman, John M. Asplund WPCF - AWWU

Community, Security, Prosperity